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Jay L Chaskin
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12/21/2004 CCHAU2 00000030 070845 10033868

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Patricia DiGregorio

(Depositor's name)

Patricia DiGregorio

(Signature)

December 16, 2004

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/033,868	12/19/2001	Alain Marie	14XZ00134	1273

TITLE OF INVENTION: MAMMOGRAPHY APPARATUS AND METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	XXX \$1,400	\$300	XXX \$1,700	12/30/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
MCCALL, ERIC SCOTT	2855	378-196000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

GE Medical Systems Global
 Technology Company, LLC

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Waukesha, Wisconsin

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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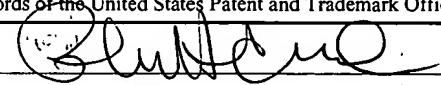
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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date December 16, 2004

Typed or printed name

Philmore H. Colburn II

Registration No. 35,101

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